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201554236	APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART UNIT	EXAMINER
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NOTICE OF ALL	OWANCE MAILED		CLAIMS ALLOWED					
· ·		Assistant Examiner	Total Claims		Print Claim for O.G			
ISS	UE FEE		DRAWING					
Amount Due	Date Paid	7	Sheets Drwg.	Figs.Drv	rg. Prir	nt Fig.		
	<u> </u>	Primary Examiner						
TERMINAL		PREPARED FOR ISSUE	Application Examiner					
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